

State of Arizona
Department of Economic Security



Annual Report

July 1, 2000 – June 30, 2001



John Clayton, Director
Mary Lou Q. Hanley, Assistant Director
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John L. Clayton
Director

A Message from Program Administrator, Henry Blanco

It is my pleasure to share with you the Aging and Adult Administration's goals and achievements for the period of July 1, 2000 to June 30, 2001, State Fiscal Year (SFY) 2001. During SFY 2001, the Administration experienced program growth and enhancement in the following areas:

- A major advocacy effort by the aging network for the expansion of Home and Community Based Services resulted in a \$1.686 million State appropriation of funds.
- The Arizona Family Caregiver Support Program was implemented, under the new Title III-E National Family Caregiver Support Program of the Older Americans Act Amendments of 2000.
- Elder Abuse and Exploitation protocol was developed, in partnership with the Maricopa County Attorney's office, the Attorney General's office, law enforcement and Area Agency on Aging, Region One.
- The State Health Insurance Assistance Program Hotline volunteers provided information and assistance counseling to 24,254 beneficiaries, resulting in \$152,000 saved in salaries and \$2,900,000 saved by beneficiaries.
- The Older Workers Program received a \$586,000 allocation of funds from the Governor's Council on Workforce Policy under the Workforce Investment Act, for training of older workers, ages 50 and above.

The Administration remains committed to expanding programs and service supporting and enhancing the ability of at-risk and older Arizonans in meeting their needs to the maximum of their ability, choice and benefit; valuing the rights of individuals; and collaborating with agencies that serve the aging population.

Sincerely,

A handwritten signature in cursive script, appearing to read "Henry Blanco".

Henry Blanco
Program Administrator
Aging and Adult Administration

Mission, Values, and Principles

Mission

The mission of the Department of Economic Security, Aging and Adult Administration is to support and enhance the ability of at-risk and older adults to meet their needs to the maximum of their ability, choice and benefit.

Values

- The rights of individuals and the preservation of their independence, self sufficiency, safety, honor and dignity;
- The rights of individuals to obtain and maintain physical and mental health;
- The individual and family initiative in directing life choices and expressing preferences;
- Equal access to quality services and supports for individuals; and
- The opportunity for employment, life-long learning and civil involvement.

Principles

- Programs and services are offered in a manner that supports and enhances independence, self-esteem, mutual respect, value, dignity, and maximizes an individual's quality of life;
- Opportunities, programs and services are designed and developed to meet the needs of older adults and prevent premature institutionalization;
- Programs and services are provided through a comprehensive and responsive system that recognizes and supports cultural diversity;
- The Administration works cooperatively with state and local leaders in developing information and access to state and community programs and services;
- Programs and services are offered in a manner that exhibits effective, efficient and appropriate management, and public accountability; and
- Program development, decisions, and actions are guided by the Administration's mission, values and objectives.

Introduction

Partnerships, Programs and Services

The Arizona Department of Economic Security, Aging and Adult Administration, in accordance with the mandates of the Older Americans Act is responsible for the administration of a statewide system of social services and programs for at-risk and Older Arizonans. The Administration provides services in partnership with eight Area Agencies on Aging (AAAs). The AAAs are instrumental in developing public policy surrounding aging issues and advocating on behalf of the aging population and multiple service delivery to older Arizonans. The Administration also works collaboratively with the Arizona Governor's Advisory Council on Aging (GACA) and the Governor's Council on Developmental Disabilities (GCDD) to promote legislative issues impacting older Arizonans.

The Annual Report for State Fiscal Year (SFY) 2001 identifies the accomplishments of the Aging and Adult Administration, profiles the characteristics of the targeted population, and describes the programs offered and the services provided within each program. Services are provided under the following programs: 1) Adult Protective Services [APS]; 2) Arizona Family Caregiver Support Program [AFCSP]; 3) Foster Grandparents Program [FGP]; 4) Legal Services Assistance; 5) Long-Term Care Ombudsman Program; 6) Non-Medical Home & Community Based Services [NMHCBS]; 7) Arizona Performance Outcome Measures System [AzPOMPs]; 8) Relatives As Parents Program [RAPP]; 9) Senior Community Service Employment Program [SCSEP]; 10) State Health Insurance Assistance Program [SHIP]; and 11) Workforce Investment Act [WIA] Program.

Service Delivery

The Administration's service delivery system, in accordance with the Arizona Department of Economic Security operational mandates, is divided into six Districts (see Appendix A). Services provided by District include APS, FGP, SCSEP, and WIA. Older Americans Act regulations require the Administration to divide states into Planning Service Areas or Regions. Arizona is divided into eight Regions (see Appendix B), which constitute the AAAs, the Navajo Nation and the Intertribal Council of Arizona. Services provided by Region include the AFCSP, AzPOMS, Legal Services Assistance, Long-Term Care Ombudsman Program, NMHCBS, RAPP and SHIP.

Profile of Older Arizonans

Population

The 2000 Census reports that there are 5,130,632 people living in Arizona. Of these, 871,536 or 17% are individuals age 60 and above. According to the 1999 U.S. Census estimates, there were 814,570 individuals age 60 and above in Arizona. This is an increase of seven percent from 1999 to 2000. Maricopa County, which includes the Phoenix urban area, contains the largest percentage of older Arizonans, accounting for approximately 53%. Pima County, which includes the Tucson urban area, accounts for 17.5% of older Arizonans. The remaining thirteen counties have older populations ranging from under 1% to 5%.

Diversity

For older Arizonans ages 60 and above, the 2000 Census indicates the following:

- 45% are male and 55% are female
- 85% are White Non-Hispanic
- 9% are Hispanic
- 3% are Native American
- 2% are African Americans
- 1 % are Asian and Pacific Islanders

Marital Status and Living Arrangements

The 2000 AARP¹ "Profile of Older Americans Report", states that in 1999, older men were much more likely to be married than were older women, 77% for the men and 43% for the women. Forty-five percent, almost half of older women, were widows. As of June 2001, there were 1,200 licensed assisted living facilities in Arizona providing care to older persons who are no longer able to live independently.

Caregivers

The National Family Caregivers Association completed a survey in 2000, which concluded that 27% of adults nationwide were involved in caregiving. Based upon current census data, this translates to more than 54 million caregivers nationwide. In 2000, the U.S. Census Bureau estimated that there were 49,274 grandparents caring for grandchildren under the age of 18 in Arizona. The 2000 Census also estimates that 34% of those grandparents cared for their grandchildren for five years or longer.

¹ Formerly known as the American Association of Retired Persons.

The DES Division of Developmental Disabilities (DDD) conducted a Family Survey in 1999 on family caregivers of developmentally disabled adults. DDD found that the statewide average age of these caregivers is 58, while the eldest age group of caregivers of developmentally disabled Arizonans ranged from 72 to 94. SFY 2001 estimates from DDD indicate that there are approximately 1,200 older relative caregivers of developmentally disabled adults in Arizona.

Financial Considerations

According to the 2000 AARP "Profile of Older Americans Report", the 1999 median income for older persons nationally was \$19,079 for males and \$10,943 for females. The AARP also reports that in 1999, households headed by individuals aged 65 and above reported a median income of \$33,148. Statistics from the Arizona 1990 Census indicate that 11% of persons age 60-64, 9% of persons age 65-74 and 13% of persons age 75 and older were below the federal poverty level statewide. In 1999, the poverty rate for individuals age 60 and above dropped to a record-breaking low 9.7%. Older men had a poverty rate of 6.9% and older women had an 11.8% poverty rate.

Health Concerns

Most illnesses are treated or prevented with the use of prescriptions. Newsweek magazine's September 25, 2000 article, "Why Drugs Cost So Much", stated that from 1995 to 1999, the nation's expenditures on prescription medications more than doubled, from \$65 billion to \$125 billion annually. It is estimated that the cost of prescriptions will increase 20% in 2002. Prescriptions are not covered by Medicare; and Medicare+Choice plans are only providing coverage for generic drugs.

The Arizona Department of Health Services reported in 1999 that 10-25% of older Arizonans have significant mental health issues. Agencies providing mental health services in Arizona do not have formal programs targeting the mental health needs of older Arizonans and Medicare coverage for mental health services is limited.

In 2000, the Greater Phoenix Alzheimer's Association reported that approximately 80,000 Arizonans are diagnosed with Alzheimer's. During Arizona's 2001 Legislative Session, HB 2595 was passed, appropriating \$1,000,000 for Alzheimer's research, \$800,000 for Parkinson's research and \$200,000 for general brain research.

Adult Protective Services

Mandates and Service Provision

Adult Protective Services (APS) is mandated to receive and evaluate reported incidents of abuse, neglect or exploitation of incapacitated or vulnerable adults age 18 years and older, and to offer available and appropriate services to assist in accordance with individual needs and acceptance. The adult may reside independently or in an institution or facility. The abuse or neglect may be self-inflicted or inflicted by another person. In developing solutions for abused, neglected or exploited adults, APS strives to find assistance that allows the adult to remain in the least restrictive setting, in his/her own residence if possible, and to maintain the highest degree of self-sufficiency. APS has the authority to file for guardianship and conservatorship for individuals who lack capacity to make or communicate informed decisions. Data detailing APS activity and demographics for SFY 2001 are taken from APS client files.

APS is a statewide program with 31 offices throughout the state (excluding Native American reservations). APS employs approximately 138 staff, 68 of whom are Human Services Specialists conducting investigations. Included in this number is the Central Intake Unit (CIU). The CIU has been in operation since April 1999, providing the public with the ability to report incidents of abuse, neglect or exploitation of incapacitated or vulnerable adults 24 hours a day, 7 days a week. The majority of after-hour reports are received from law enforcement and other emergency personnel. APS continues to respond to reports from 8:00 AM to 5:00 PM, Monday through Friday, excluding holidays. The CIU also has the ability to translate 144 languages from referral sources utilizing their Language Line.

Inquiries

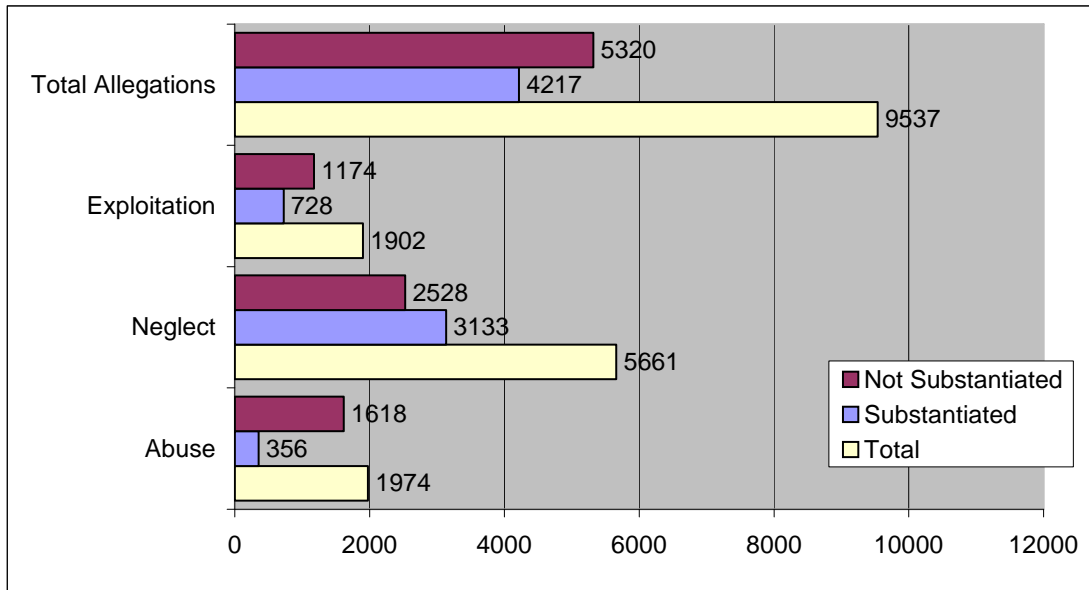
In SFY 2001, APS received 13,047 inquiries. Of the inquiries, 10,243 resulted in reports of abuse, neglect and exploitation of vulnerable or incapacitated adults, and 2,810 resulted in the provision of information and referral to other agencies. Of the reports, 8,312 resulted in field investigations and 1,931 resulted in assessment without field investigations.

Allegations and Investigations

Due to the prevalence of multiple allegations within a single investigation, there were 9,537 allegations of abuse, neglect and/or exploitation within the 8,312 investigations during SFY 2001. Abuse was alleged 1,974 times and substantiated 356 times (18%); neglect was alleged 5,661 times and

substantiated 3,133 times (55%); and exploitation was alleged 1,902 times and substantiated 728 times (38%).

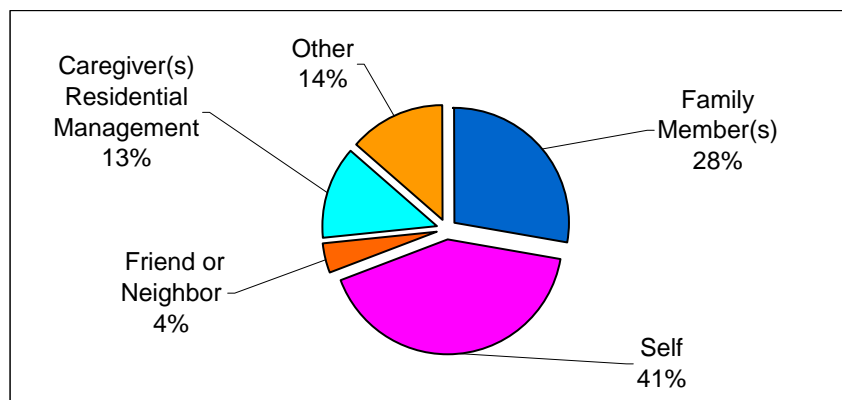
Chart 1 – Number of Field Investigations Alleging Abuse, Neglect or Exploitation



Perpetrators

A perpetrator is a person alleged to have neglected, abused or exploited an incapacitated or vulnerable adult. Self-neglect (client unable or unwilling to care for him/herself) was alleged in 41% of the cases reported to APS. Family members are the second highest category of perpetrators in APS investigations at 28%, followed by others (telemarketing, home repair scams or mail fraud) at 14% and caregiver(s) or residential management at 13%. Friend or Neighbor at 4%.

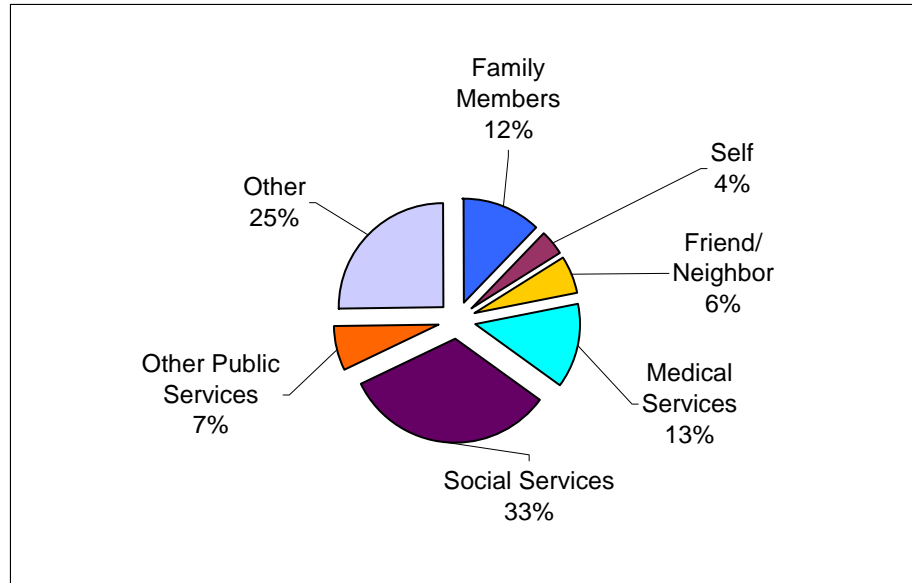
Chart 2 – Perpetrators



Reporting Sources

Reporting sources are persons or agencies that report alleged abuse, neglect or exploitation of incapacitated or vulnerable adults to APS. Social services comprise 33% of reporting sources. Other (law enforcement and/or anonymous) account for 25%, while medical services account for 13%. Family members are the fourth largest group of reporting sources at 12%.

Chart 3 – Reporting Sources



APS Client Demographics for SFY 2001

- ♦ 21% of APS clients are 18-59 years of age
- ♦ 57% are 60 years of age and older
- ♦ 22% of APS clients are 85 years of age and older
- ♦ 75% are Caucasian and 11% are Hispanic
- ♦ 63% of APS clients are female and 37% are male

Statewide Accomplishments

All APS Districts are involved in the Statewide Elder Abuse Task Force, under the auspices of the Attorney General's office. During SFY 2001, the Arizona APS program provided staff who served as "subject matter experts" in the development of an elder crime video. The video was planned, organized and developed through the Arizona Peace Officers Standards and Training Board (AZPOST). Participants in the AZ POST include APS, law enforcement, the County Attorney, the Arizona Attorney General's Office, the Alzheimer's Association and the Arizona Department of Health Services. The video "telecourse" is official certification for law enforcement personnel and is being used to train other

entities. APS staff are also active in the Elder Issues Task Force convened by the Attorney General's Office and a member of a sub-committee, Licensure Group.

District Statistics and Accomplishments

District I incorporates Maricopa County, which includes the Phoenix urban and outlying rural areas. District I received 4,587 reports in SFY 2001, representing 45% of total reports. Of the reports, 3,547 resulted in field investigations. Abuse was alleged 1,024 times, neglect was alleged 2,325 times and exploitation was alleged 751 times. During SFY 2001, District I APS continued its involvement and on-going participation and coordination with community agencies and councils, as follows:

- ♦ worked closely with two hospital family practice programs and one geriatric fellowship program for the direct medical evaluation of clients' needs;
- ♦ conducted presentations on the roles & responsibilities of APS to Home Health Care agencies, nursing students, hospitals, nursing homes, behavioral health and Rotary & Optimists clubs; and
- ♦ partnered with the Maricopa County Attorney's office, representatives from law enforcement, medical, legal, Long-Term Care Ombudsmen and other social services providers in developing Elder Abuse and Exploitation protocol. APS, the Attorney General's office, Mesa Police Department, Maricopa County Sheriff's Department and the Region One Area Agency on Aging participated in the on-going pilot project, which is intended to develop a closer and more effective working relationship between the agencies. Statistics from this pilot project will be available in SFY 2002.

District II incorporates Pima County, which includes the Tucson urban and outlying rural areas. District II received 2,192 reports in SFY 2001, representing 21% of total reports. Of the reports, 1,759 resulted in field investigations. Abuse was alleged 359 times, neglect was alleged 1,181 times, and exploitation was alleged 519 times. During SFY 2001, District II APS continued its involvement and on-going participation and coordination with community agencies and councils, as follows:

- ♦ partnered with the DES Division of Developmental Disabilities Core Training program for staff in Pima County;
- ♦ maintained active involvement with the Pima Elder Abuse Criminal Investigation Task Force, which is sponsored by the Tucson Police Department and the Attorney General's office, and is working towards developing training for physicians and Emergency Medical Technicians in the area of recognizing, responding to and reporting Elder Abuse;

- ♦ provided field experiences for resident physicians in the geriatric rotation of the University of Arizona Family Practice Department;
- ♦ worked with the Attorney General's office and law enforcement to initiate the Pima County Death Review Committee (DART) to examine suspicious deaths of older persons;
- ♦ provided instrumental involvement in bringing exploitation perpetrators with multiple victims to the attention of law enforcement and regulatory agencies, involving the private bar in conducting an informational meeting for the victims and their families; and
- ♦ held a highly successful Older Americans Month celebration in May of 2001 involving residents, families and staff at an Assisted Living home.

District III contains four northern Arizona counties – Apache, Coconino, Navajo, and Yavapai. District III received 909 reports of abuse, neglect and exploitation in SFY 2001, representing 9% of total reports. Of the reports, 769 resulted in field investigations. Abuse was alleged 176 times, neglect was alleged 543 times and exploitation was alleged 148 times. During SFY 2001, District III APS continued its involvement and on-going participation and coordination with community agencies and councils, as follows:

- ♦ continued involvement in providing consultation services to the Hopi Tribe, which is developing an Elder Protection Program in Apache County; and
- ♦ maintained membership on the Coconino County Response Team (CCRT), which is a partnership of county-wide agencies that work together to respond to domestic violence within the county.

District IV contains three western Arizona counties - La Paz, Mohave, and Yuma. District IV received 1,136 reports of abuse, neglect and exploitation in SFY 2001, representing 11% of total reports. Of the reports, 983 resulted in field investigations. Abuse was alleged 182 times, neglect was alleged 704 times and exploitation was alleged 222 times. During SFY 2001, District IV APS continued their involvement and on-going participation and coordination with community agencies and councils, as follows:

- ♦ participated in the organization of an Elder Abuse investigation and prosecution seminar, which was a 2-day conference certified as an official law enforcement training; and
- ♦ sponsored a share fair for legislators, employees of social services agencies and clients, with the goal of sharing information about DES services.

District V is comprised of the two south central Arizona counties - Gila and Pinal. District V APS received 592 reports alleging abuse, neglect and exploitation in SFY 2001, representing 6% of total reports. Of the reports, 489 resulted in

field investigations. Abuse was alleged 108 times, neglect was alleged 355 times and exploitation was alleged 96 times. During SFY 2001, District V APS continued its involvement and on-going participation and coordination with community agencies and councils, as follows:

- ♦ participated with the Elder Abuse Specialist Team, which received a distinguished service award from Attorney General Janet Napolitano in recognition of services to victims of crime (the award was presented at the 2001 Arizona Coalition for Victim Services Conference); and
- ♦ participated in many diversified community activities to promote and provide information on APS, with booths set up at the Globe-Miami Care Fair, Pinal County Fair, Senior Fair in Florence, the Senior Fair at the Central Arizona College and the Saddlebrook Health Fair.

District VI contains four southeastern Arizona counties - Cochise, Graham, Greenlee and Santa Cruz. District VI APS received 827 reports of abuse, neglect and exploitation in SFY 2001, representing 8% of total reports. Of the reports, 729 resulted in field investigations. Abuse was alleged 125 times, neglect was alleged 553 times and exploitation was alleged 166 times. During SFY 2001, District VI APS continued their involvement and on-going participation and coordination with community agencies and councils, as follows:

- ♦ participated in the "Turning Point" forum, which is a community based conference to provide information about all social services in the area; and
- ♦ continued to act as gatekeeper for the voucher program, which provides vouchers for gas or food for people who are stranded or for transients, with funding provided by the ministerial association in Graham County.

Long-Term Care Ombudsman Program

Authority and Purpose

The Arizona Long-Term Care Ombudsman Program is authorized by the Older Americans Act and Arizona law. The program was implemented by the federal and state government's response to concerns that individuals residing in long-term care facilities may be subject to abuse, neglect, or substandard care, and may lack the ability to exercise their rights, or voice complaints about their circumstances. Ombudsman services are designed to improve the quality of care and the quality of life of Arizona's long-term care residents. The program's primary purpose is to identify, investigate, and resolve complaints made by or on behalf of long-term care residents.

Program Responsibilities

The Arizona Long-Term Care Ombudsman Program is responsible for the following: 1) Provision of information and consultation to individuals regarding long-term care issues and services; 2) Identification and advocacy regarding long-term care concerns; 3) Provision of consultation and training to facility staff; 4) Routine visits to long-term care facilities to provide residents with easy access to ombudsman service; 5) Participation in Department of Health Service (DHS) facility surveys; and 6) Working with and supporting family and resident councils.

Oversight and Service Delivery

At the federal level, oversight for the Arizona Long-Term Care Ombudsman Program is provided by the Administration on Aging. At the state level, oversight is provided by the Aging and Adult Administration. Ombudsman services to residents are provided at the regional level through contracts with local Area Agencies on Aging. Oversight and technical assistance to the regional Ombudsman Programs are provided by the State Long-Term Care Ombudsman. The regional programs employ 17 full and part-time staff. Volunteers are also an integral part of the Ombudsman Program. One hundred and twenty-eight certified ombudsman volunteers assisted the program during SFY 2001.

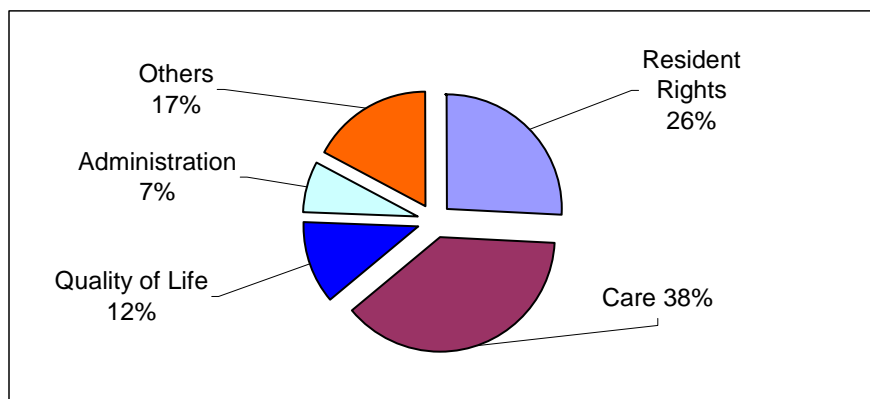
Facilities and Complaints

Arizona's long-term care facilities consist of skilled nursing facilities and assisted living facilities. According to DHS, Arizona has approximately 1,377 long-term care facilities with beds available to accommodate approximately 40,846 residents. The Ombudsman Program has the authority to enter all facilities to communicate with residents. This past year, the Ombudsman Program received 7,045 complaints from 3,347 complainants. Seventy-eight percent of the

complaints received were substantiated. Of the complaints that were substantiated, 90% were resolved to the satisfaction of the complainant. The national standard for rate of satisfaction is 71%.

Complaints involve violations of residents' rights, concerns about residents' care, problems surrounding quality of life issues, problems involving the administration of the long-term care facility, and problems involving people, systems, and agencies outside of the facility. Chart 4 shows the percentage of complaints received by type of complaint.

Chart 4 – Ombudsman Complaint Investigation



Challenges

The Ombudsman Program continues to be challenged to meet the needs of long-term care residents. Resources for the program do not meet this increased demand for service. Without sufficient resources, Ombudsmen cannot make regular visits to all facilities, or provide other necessary services in a timely manner.

The changes in the provision of health care services and the increasingly complex issues generated by these changes have created a climate of confusion for health care consumers. At present there are few resources available to provide information to individuals and families to help make informed decisions. As a result, the Ombudsman Program has experienced an increased demand to provide consultation to individuals and families seeking information about long-term care.

Legal Services Assistance Program

Responsibilities and Statistics

The Legal Services Assistance Program coordinates legal assistance programs within Arizona's aging network, providing technical assistance on both delivery and substantive issues, and planning and conducting training on legal intervention. The Aging and Adult Administration provides legal services assistance to older Arizonans through six Area Agencies on Aging. The Navajo Nation and the Inter-Tribal Council of Arizona have requested waivers from providing legal services. Tribal lawyers serve the needs of Native Americans on the reservations. Legal service assistance is available to any individual 60 years of age or older, with particular attention to those in greatest social and economic need with special emphasis on low-income minority individuals. In SFY 2001, approximately 4,000 older Arizonans received legal service assistance. The average cost to provide legal services was \$38.99 per person.

Legal Training

During SFY 2001, the Legal Services Assistance Program, in cooperation with the Attorney General's office, developed a highly specialized training on legal issues and mandates for new Adult Protective Service (APS) personnel. The training not only provided information on the legal mandates of the program but also provided personnel with additional training on the following topics: 1) Securities Fraud; 2) Insurance Fraud; 3) Public/Private Fiduciary Functions; 4) Alternatives to Guardianship; and 5) Investigating Abuse, Neglect or Exploitation.

The Legal Service Assistance Program continues to educate Department of Economic Security (DES) staff in legal intervention options. The training program, known as 'Advanced Directives Seminars', provides instruction in the following areas: 1) Health Care - Living Will, Health Care Power of Attorney, Pre-Hospital Directives; 2) Financial - General Power of Attorney, Durable Power of Attorney, Trusts; and 3) Estate - Wills, Trusts, Payable on Death Accounts, Rights of Survivorship.

During SFY 2001, the Legal Service Assistance Program conducted ten Advanced Directives Seminars. The seminars were conducted across the state from January to June of 2001. Staff from APS, the Division of Developmental Disabilities, Child Support Enforcement, the Arizona State Hospital, and DES retirees attended the seminars.

State Health Insurance Assistance Program

Responsibilities

The State Health Insurance Assistance Program (SHIP) provides information, education and assistance to Arizona's 690,000 Medicare beneficiaries, their families, caregivers and service professionals with regard to potential eligibility for benefits, insurance or assistance programs. The responsibilities of the Arizona SHIP include:

- ♦ Provision of health insurance information, counseling and assistance to vulnerable and older adults, their families, caregivers and service providers to ensure they receive the government and private benefits to which they are entitled;
- ♦ Provision of information and education on long term care insurance, benefit or assistance programs including Medicaid and Medicare managed care options to enable beneficiaries to make informed choices;
- ♦ Conducting outreach to under-served populations to ensure they understand the health benefits available, how to access them and their rights and responsibilities;
- ♦ Training of SHIP and Information and Referral staff and volunteers in Area Agencies on Aging (AAAs) and affiliated organizations in Medicare, Medicaid and other benefit programs in order to allow them to counsel clients. Volunteers are trained to assist clients in obtaining services or benefits and preparing appeals of denials when necessary; and
- ♦ Education and outreach to beneficiaries on Medicare/Medicaid Fraud and Abuse.

Funding and Service Delivery

The Arizona SHIP² is funded by grants from the Centers for Medicare & Medicaid Services³, National Association of State Units on Aging (NASUA) and the Administration on Aging (AoA). Arizona SHIP operates a nationwide, toll free Hotline, which is staffed eight hours per day by experienced volunteer counselors at the A&AA, and in programs conducted by staff and volunteers at the eight AAAs. Over 600 volunteers and staff members of the AAAs or related social and health service organizations have completed a four day training program to provide program services. Many of the volunteers are cross-trained in other

² Arizona SHIP may also be referred to as the Benefits and Insurance Outreach and Pension Counseling Program, as outlined in Title VII of the Older American's Act.

³ Formerly known as Health Care Finance Administration (HCFA).

programs such as Legal Advocacy or Long-Term Care Ombudsman. The program is under the direction of a State SHIP Program Coordinator and SHIP Managers at contracted AAAs.

In SFY 2001, there were 690,000 Medicare beneficiaries who were permanent residents of Arizona. An additional 400,000 Medicare beneficiaries were winter residents. The Arizona SHIP had a total of 102 volunteer counselors who spent 1,573 hours in training and 12,201 hours providing counseling throughout the state. The volunteer counselors provided one-to-one counseling to 4,851 beneficiaries and eight Hotline volunteers provided information and assistance by telephone to 24,254 beneficiaries. Utilizing these volunteer counselors to provide services saved the program over \$152,512 in salaries alone. In addition, the estimated total dollars saved by beneficiaries through counseling assistance was \$2,881,347.

Medicare + Choice

The Balanced Budget Act of 1997 created Medicare +Choice, which added eight different options for Medicare beneficiaries to receive benefits. Arizona was chosen as a pilot state for the introduction of these Medicare +Choice programs. Since 1998 beneficiaries in the rural and urban counties of the state have been impacted by Medicare +Choice Managed Care Plan service area reductions affecting over 36,000 beneficiaries each year. In the fall of 2000, 35,000 beneficiaries were sent plan termination letters referring them to the SHIP Hotline number for assistance. SHIP also assisted the Centers for Medicare & Medicaid Services with eight emergency outreach events, attended by over 4,000 beneficiaries. During July 2000 through June 2001, over 62,900 beneficiaries were counseled on their Medicare benefits, rights, and protections. With the loss of Medicare +Choice Managed Care Plans, beneficiaries expressed their difficulties in receiving assistance with prescription expenses, finding insurance companies who serve the under 65 disabled market, and affording supplemental insurance. In addition, SHIP assisted with three congressional briefings given by Medicare Contractors during the year.

Outreach

Program staff made 408 educational presentations on Medicare and other benefits, beneficiary rights and responsibilities, and application processes to 35,021 people, and participated in 96 outreach events. The Arizona Beneficiary Coalition continues to partner in outreach and problem resolution with members representing Medicare Parts A and B, Health Services Advisory Group, Arizona Health Care Cost Containment System, Social Security, A&AA and the Arizona Department of Insurance, through health fairs, outreach events, and newsletters.

Older Worker Programs

Senior Community Service Employment Program

The mission of the Senior Community Service Employment Program (SCSEP) is to empower the economically disadvantaged person age 55 or older with job opportunities and training programs to enhance the participant's quality of life. SCSEP operates under Title V of the Older American's Act and provides subsidized part-time employment to workers age 55 and older who are at or below 125% of the federal poverty level. The purpose of SCSEP is to train workers and enable them to move to unsubsidized positions in the public and private sector. In addition, the SCSEP's goal is to improve the quality of life of older workers by moving them toward self-sufficiency.

The Aging and Adult Administration (A&AA) contracts with 45 non-profit and government agencies throughout the state to provide training for SCSEP participants. While placed in these agencies, SCSEP participants receive on-the-job training, and their current skills are honed as new skills are learned. With the supervision and assistance of SCSEP staff and staff of the contracted agencies, the participants gain skills, confidence and experience, which may lead to unsubsidized employment.

SCSEP works in partnership with the Workforce Investment Act (WIA) Administration, the Coalition to Promote Older Worker and Employer Resources (C-POW+ER), the One-Stop Career Centers and the 45 contracted agencies. SCSEP continues to work closely with the Department of Economic Security (DES) One-Stop Career Centers and is increasing the utilization of the Private Sector Initiative Program (PSIP). The PSIP offers small businesses a cost-free means of accessing the abilities of a growing pool of qualified, mature workers. This type of collaboration allows DES to leverage federal funding to better serve clients.

In SFY 2001, the average hourly wage of all older workers placed into unsubsidized employment from the SCSEP rose to \$8.78, and the total number of job placements was 135. SCSEP collaborates with Green Thumb, Inc., a national non-profit sponsor of SCSEP, to conduct the Search for Arizona's Oldest Outstanding Worker. The Oldest Outstanding Worker will represent Arizona at Green Thumb's Prime Time Award Initiative held in Washington, D.C. in September 2001, where the Nation's Oldest Outstanding Worker will be announced.

**Table 1 - SCSEP Funding, Applicants Enrolled and
Unsubsidized Placements for SFY 2000 and SFY 2001**

Program Year	Funding	Total Applicants Enrolled	Number of Unsubsidized Placements
SFY 2000	\$ 2,886,316	417	163
SFY 2001	\$ 2,802,005	421	135

Workforce Investment Act -Older Worker Training Program

The partnership between SCSEP and the WIA has been instrumental in the training and placing of older workers into unsubsidized employment. SCSEP partners with One-Stop Career Centers to provide information and referral, case management, counseling, job training and supportive services to older workers. Employment and training services are available to eligible individuals who are 55 years of age or older, who meet the Department of Labor requirements and the Arizona income guidelines for the economically disadvantaged. The new WIA will continue to partner in providing training and employment opportunities to older workers. The new legislation under the WIA brings about a major transformation of workforce development systems by consolidating and streamlining over 70 federal employment and training programs into one system.

Foster Grandparent Program

Foster Grandparent Program (FGP) senior volunteers provide supportive services in health, education, welfare, or related settings to help alleviate physical, mental or emotional problems of children having special or exceptional needs. The FGP offers senior volunteers opportunities to serve as mentors, tutors and caregivers. Foster Grandparents provide 20 hours of weekly service through community organizations such as schools, hospitals, centers for abused or neglected youth, Head Start Programs and youth centers. DES sponsors the FGP throughout Arizona excluding the following counties: Apache, Coconino, Navajo and Yavapai. The FGP gives participants the opportunity to share a lifetime of experience with children having special needs. Funding for the FGP is provided through the Corporation for National Service/Senior Service Corps, a network of federally supported programs.

Non-Medical Home and Community Based Services

Federal, State and Local Funding

The Non-Medical Home and Community Based Services (NMHCBS) System offers an array of services designed to assist older and/or disabled Arizonans to live as independently as possible in their homes or communities. Federal, state and local funding are combined to support the NMHCBS System. The funding sources include the following:

- ♦ Older Americans Act (OAA) - Title III & Title VII;
- ♦ Social Services Block Grant (SSBG);
- ♦ Other Federal
- ♦ State Appropriated Funds;
- ♦ Arizona Long Term Care System (ALTCS); and
- ♦ Locally generated sources including participant contributions, city funds, County United Way funds, and local foundation funds.

NMHCBS Focus, Eligibility and Services

There are three major focuses of the NMHCBS System. First, the system provides an array of services to prevent inappropriate or premature institutionalization. Second, the system allows an individual to live independently in his/her home or community setting as long as possible. Third, the system strengthens the informal supports created by families and caregivers of older Arizonans and Arizonans with disabilities.

NMHCBS System eligibility is determined by an assessment of functional ability to determine if the individual is moderately to severely impaired in two or more areas of Instrumental Activities of Daily Living or Activities of Daily Living. The Area Agencies on Aging (AAAs) provide entry into the NMHCBS System as well as the NMHCBS services. Serving individuals who are the most frail and most at-risk of institutionalization is a top priority, in accordance with the OAA. The NMHCBS System provides thorough, comprehensive case management to coordinate services. The services offered by the NMHCBS System include the following:

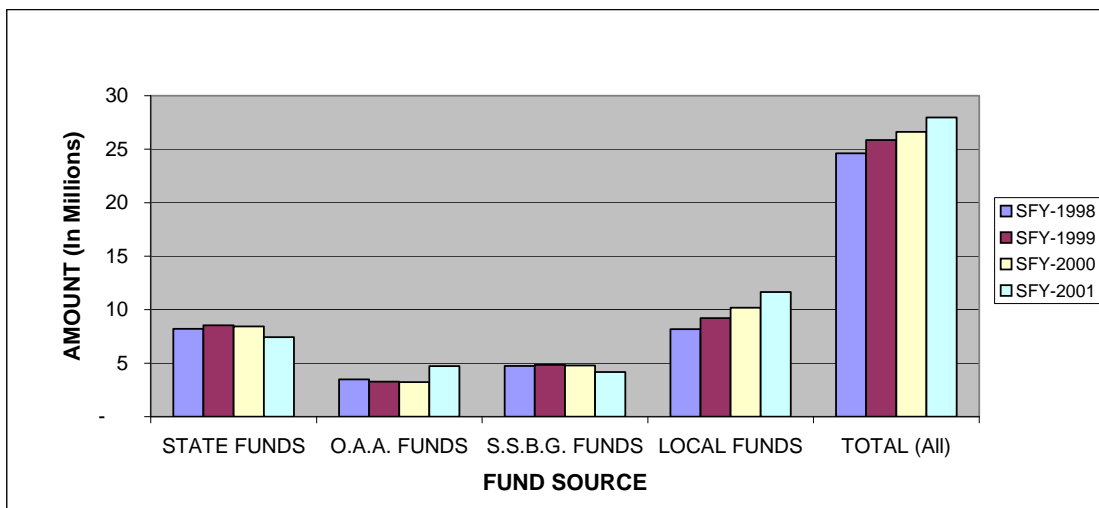
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|-------------------------------|-----------------------|
| ♦ Adult Day Health Care (ADC) | ♦ Housekeeping (HSK) |
| ♦ Case Management (CMG) | ♦ Personal Care (PRC) |
| ♦ Home Delivered Meals (HDM) | ♦ Respite Care (RSP) |
| ♦ Home Health Aid (HHA) | ♦ Home Nursing (VNS) |

Funding and Growth Trends

Table 2 – NMHCBS SFY 1998 through SFY 2001 Funding

	State Funds	O.A.A. Funds	S.S.B.G. Funds	Local Funds	Total (All)
SFY-1998	\$ 8,203,987	\$ 3,481,669	\$ 4,736,840	\$ 8,187,425	\$24,609,921
SFY-1999	8,535,297	3,271,556	4,838,342	9,209,249	25,854,444
SFY-2000	8,427,138	3,238,492	4,777,266	10,180,789	26,623,685
SFY-2001	7,418,317	4,716,138	4,179,847	11,644,354	27,958,656

Chart 5 – NMHCBS Funding Growth Trend



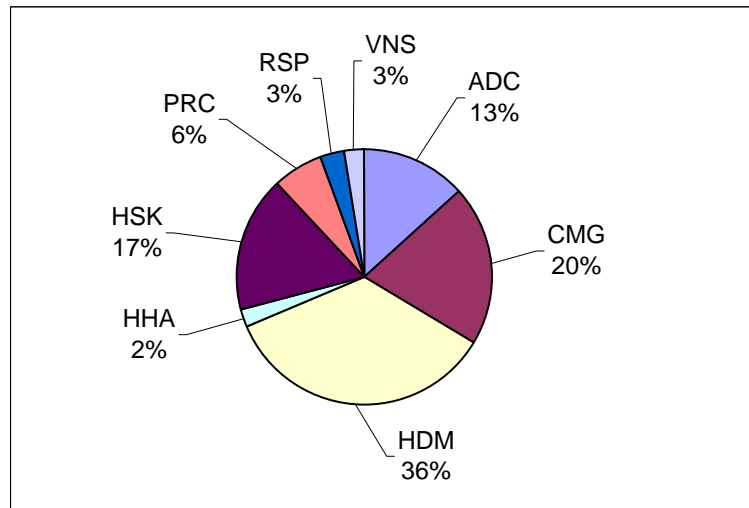
- ♦ The largest increase was in local funds with a 42% increase between SFY 1998 and SFY 2001. A large part of the increase was due to providers receiving increased ALTCS funding to provide services to ALTCS participants.
- ♦ The OAA Funding had a 26% increase between SFY 1998 and SFY 2001 due to the addition of the new Title III-E Family Caregiver Support Program.

SFY 2001 Funding Sources and Services

Table 3 – SFY 2001 NMHCBS Funding

	ADC	CMG	HDM	HHA	HSK	PRC	RSP	VNS	TOTAL
State	\$ 0	\$1,543,505	\$ 0	\$436,096	\$3,021,139	\$1,440,967	\$456,444	\$520,166	\$ 7,418,317
OAA	529,257	716,608	2,652,234	16,571	365,134	171,440	245,390	19,502	4,716,138
SSBG	422,325	1,410,304	1,165,044	172,359	709,194	132,679	77,401	90,540	4,179,847
Local/Other	2,781,018	1,977,403	5,960,576	35,878	680,480	38,825	91,095	79,080	11,644,354
TOTAL	\$3,732,600	\$5,647,820	\$9,777,855	\$660,903	\$4,775,947	\$1,783,912	\$870,331	\$709,289	\$27,958,657

Chart 6 – SFY 2001 NMHCBS Funding by Service



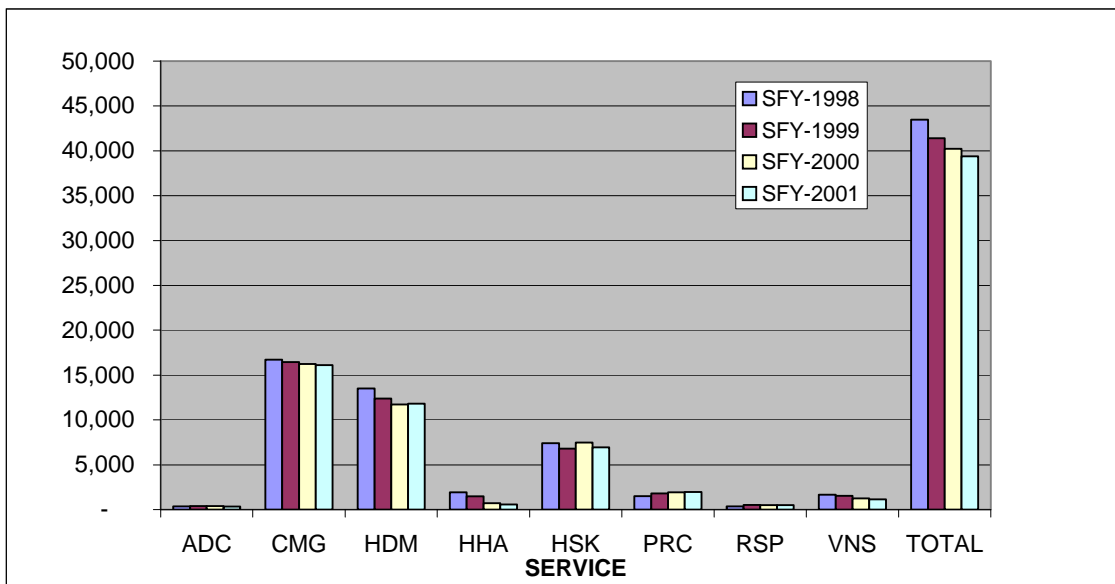
- ♦ Home Delivered Meals expenditures represent the highest cost at 36% of the total, due to the rising cost of providing the service and the volume of service provided.
- ♦ Case Management expenditures represent the next highest cost at 20% of the total, due to the volume of service provided.

Participant Growth Trends

Table 4 – Participants from SFY 1998 to SFY 2001

	ADC	CMG	HDM	HHA	HSK	PRC	RSP	VNS	TOTAL
SFY-1998	372	16,714	13,506	1,932	7,402	1,502	380	1,669	43,477
SFY-1999	401	16,447	12,407	1,486	6,786	1,801	535	1,541	41,404
SFY-2000	386	16,238	11,722	711	7,482	1,934	516	1,250	40,239
SFY-2001	346	16,106	11,820	583	6,942	1,957	505	1,132	39,391

Chart 7 – Participants Served by NMHCBS from SFY 1998 to SFY 2001



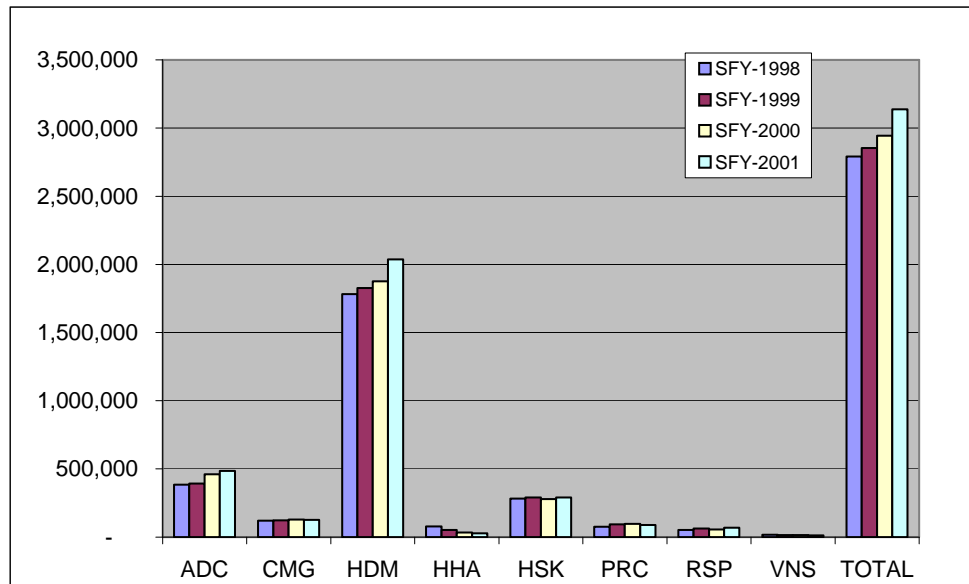
- Home Health Aid services experienced a 70% decline due to participants transferring to Personal Care service
- Home Nursing also experienced a decline, with 32% fewer participants requiring this service over the four-year period, due to the expense involved in hiring a RN, and/or contracting with a licensed home health agency.
- Due to the additional state funds appropriated for Respite Care, this service increased by 33% over the four-year period.

Unit Growth Trends

Table 5 – Units from SFY 1998 to SFY 2001

	ADC	CMG	HDM	HHA	HSK	PRC	RSP	VNS	Total
SFY-1998	385,714	121,570	1,781,500	77,316	281,795	75,376	51,794	16,559	2,791,624
SFY-1999	392,687	122,614	1,826,608	52,070	289,218	92,103	62,448	14,967	2,852,715
SFY-2000	460,708	127,846	1,876,020	33,425	279,007	96,419	55,734	15,649	2,944,808
SFY-2001	484,652	125,742	2,036,993	27,266	290,480	90,117	68,780	13,070	3,137,100

**Chart 8 – Non Medical Home & Community Based Units
4-Year Growth Trend**



- Overall, there was a 12% increase in the total units provided between SFY 1998 and SFY 2001.
- Home Delivered Meals increased by 14% between SFY 1998 and SFY 2001.
- Adult Day Health Care reflects a 25% increase in service units; however, the increase is due to an increased number of ALTCS participants receiving services through NMHCBS System providers.

Demographics for NMHCBS Participants for SFY 1999 to SFY 2001

- ♦ White, Non-Hispanics represent the largest number of participants averaging 72% of the total participants during the three-year period.
- ♦ Hispanics maintained approximately a 16% participation rate in the NMHCBS System over the three-year period.
- ♦ African-Americans represent approximately 5% of the NMHCBS System participants for the three years.
- ♦ Asian-Americans represent the smallest group of participants with a less than 1% participation rate for the three years.
- ♦ Persons 75 to 85 represents the largest number of participants averaging 31% of the total participants during the three-year period.
- ♦ Persons 85 and older represent the next largest and fastest growing group in the NMHCBS System.

Additional NMHCBS Services and Waiting List

Other Home and Community Based services are also available within the NMHCBS System to individuals who are 60 years of age or older and/or disabled individuals under 60. These services include the following:

- ♦ Congregate Meals in Senior Centers
- ♦ Outreach
- ♦ Transportation
- ♦ Home Repair
- ♦ Recreation/Socialization
- ♦ Nutrition Assistance
- ♦ Information and Referral
- ♦ Alzheimer's CARE Program
- ♦ Legal Services
- ♦ Long-Term Care Ombudsman (under 65 years old)
- ♦ State Health Insurance Program (under 65 years old)

The waiting list for SFY-2001 NMHCBS was a total of 651 participants, with the highest number waiting for Housekeeping (308) and Personal Care PRC (107). Individuals declining NMHCBS generally chose to seek assistance outside of the NMHCBS System.

State Tobacco Tax

Appropriations and Services

The 1994 State of Arizona Tobacco Tax initiative specified that Tobacco Tax state revenue be used to fund the Arizona Health Care Cost Containment System (AHCCCS) Medically Needy Account. In 1997, the Governor's Advisory Council on Aging initiated a process resulting in the distribution of funds from the State Tobacco Tax from AHCCCS to the Aging and Adult Administration in the amount of \$500,000 per year for SFY 1998 - 2001. The Aging and Adult Administration, through the Area Agencies on Aging, provides specific types of home and community based services with the Tobacco Tax funds, which includes: 1) Adaptive Aids and Devices; 2) Home Repair/Renovation; 3) Emergency Attendant Care, Respite Care or Housekeeping; and 4) Medically Related Transportation.

Eligibility

State Tobacco Tax Program eligibility is based on income status. The income-limiting factor for client service eligibility was set at 100% of the Federal Poverty Guidelines in 1999. The State Tobacco Tax program served 791 people in SFY 2001. The majority of services provided were Adaptive Aids and Devices which served 467 clients.

Expenditures and Services Provided

Table 6 - Statewide Tobacco Tax for SFY 2001

EXPENDITURES & CLIENTS	AD1/AD2	AT1	HS2	RP1	RSP/RS3	TR4	CM2	TOTAL
Local	\$30,766	\$274	\$69	\$729	\$-0-	\$241	\$-0-	\$32,079
Tobacco Tax	\$282,896	\$13,316	\$7,901	\$84,383	\$25,000	\$5,475	\$1,832	\$420,803
Subtotal	\$313,662	\$13,590	\$7,970	\$85,112	\$25,000	\$5,716	\$1,832	\$452,882
Units	470	468	215	98	3,083	111	28	4,473
Aver. Rate/Unit	\$667.29	\$29.04	\$37.07	\$868.49	\$8.11	\$51.5	\$66.15	\$101.25
Clients	467	18	51	100	86	69	*	791

*No data available

Legend

AD1/AD2 = Adaptive Aides & Devices
AT1 = Attendant Care/Personal Assistance
HS2 = Housekeeping/Homemaker & Chore
CM2 = Case Management

RP1 = Home Repair/Renovation
RSP/RS3 = Respite Care
TR4 = Emergency Transportation

Caregiver Programs

The Arizona Family Caregiver Support Program

The Older Americans Act Amendments of 2000 established a National Family Caregiver Support Program. Arizona received an allocation of \$1.9 million to implement the Arizona Family Caregiver Support Program. The program calls for all states, working in partnership with Area Agencies on Aging (AAAs) and local community-service providers to have five basic services for family caregivers, including:

- ♦ Information to caregivers about available services;
- ♦ Assistance to caregivers in gaining access to supportive services;
- ♦ Individual counseling, organization of support groups, and caregiver training to caregivers to assist the caregivers in making decisions and solving problems relating to their caregiving roles;
- ♦ Respite care to enable caregivers to be temporarily relieved from their caregiving responsibilities; and
- ♦ Supplemental services, on a limited basis, to complement the care provided by caregivers.

Services are to be provided to (1) family caregivers of older adults and (2) grandparents and other relative caregivers of children not more than 18 years of age. The statute requires states to give priority consideration to: 1) persons in greatest social and economic need (with particular attention to low-income, minority individuals); and 2) older individuals providing care and support to persons with mental retardation and related developmental disabilities.

Arizona Relatives As Parents Program

The Relatives As Parents Program (RAPP) is a Statewide Initiative aimed at serving Kin Caregivers. RAPP has three primary objectives: 1) to facilitate the development of five new relatives as parents support groups; 2) to expand the statewide RAPP network; and 3) to enhance the participation in the RAPP statewide task force. The RAPP initiative is funded through the Brookdale Foundation Group and is implemented through the Arizona Department of Economic Security, Aging and Adult Administration (A&AA).

The A&AA has contracted with the Beatitudes Center D.O.A.R. (Developing Older Adult Resources) to issue mini-grants in an effort to encourage and enable the development of local relatives as parents support groups. Two support groups have been initiated under the sponsorship and support of local agencies in

different parts of the state. The first support group, the West Valley Grandparents Support Group, began in April 2001 and meets twice a month. The meetings are conducted in Spanish and English and facilitated by the University of Arizona Cooperative Extension Services and the Beattitudes Center D.O.A.R. Meetings are held at the Isaac School District, where approximately 20 grandparents attend the meetings, the majority of whom are Hispanic. The second support group is facilitated by the Tohono O'Odham Agriculture Extension Program in Sells, Arizona and meets every third Thursday of the month. This support group serves the Tohono O'Odham Reservation and the surrounding communities. Approximately six to eight young grandmothers (in their 40's) attend the meetings.

The A&AA is also a member of the Grandparents' Concerns Task Force (GCTF), formed by the Governor's Advisory Council on Aging in June of 1997 in response to concerns surrounding grandparents as the primary caregivers of their grandchildren. GCTF is co-sponsored by the Beattitudes Center D.O.A.R. The membership consists of the A&AA, Area Agency on Aging - Region One, Grandparents United for Children's Rights, Pima County Cooperative Extension, Tohono O'Odham Agriculture Extension, University of Arizona Cooperative Extension Services, Arizona Health Care Cost Containment System, Parents Anonymous, Las Salas After School Program, and the Tempe Elementary School District. A primary focus of the task force is to plan, prepare, and conduct the annual Grandparent's University. Sixty grandparents attended the 2nd Annual University was held on November 4, 2000 in Phoenix. Topics included dealing with young at-risk children with attachment problems, legal issues for grandparents, depression in youth, and grandparent-child relationships – learning to communicate.

During the 2000 legislative session, the Arizona Legislature passed House Bill 2400 and Senate Bill 1290, which established kinship care and foster kinship care. The legislation was passed in late April 2000 and officially signed into legislation on August 24, 2000. The A&AA is a member of the Kinship Care Work Group which was established to collaborate in the development of a comprehensive plan for kinship care and kinship foster care pilot projects in Arizona. The Department of Economic Security (DES) held kinship forums and focus groups to elicit input for the comprehensive plan. Relative and foster care parents, community advocacy groups, legislative officials, and DES staff responsible to implement the program were invited to attend. South Tucson and South Phoenix were chosen as pilot sites for kinship care, providing special consideration to nonparent specified relatives who are supporting children who cannot live with the children's parents and are not under the jurisdiction of the Administration for Children Youth and Families. Assistance may be provided in

the form of cash assistance (average monthly payment of \$135.09 for children under kinship care), food stamps, or medical coverage for the child. Although two pilot sites are implementing the kinship care and kinship foster care program, the respective policy has been implemented statewide.

Alzheimer's Caregivers Are Really Extraordinary (CARE) Program

Arizona is one of sixteen states to participate in the second phase of the Administration on Aging Alzheimer's Disease Demonstration Grants to States. The Aging and Adult Administration awarded the Area Agency on Aging, Region One, a contract in June 2001 to implement the Alzheimer's CARE program and provide direct services. The Arizona Chapter of the Alzheimer's Association is a partner with the Area Agency on Aging, Region One, Inc. to administer needs assessment, provide care management, and deliver professional and family caregiver training. The purpose of the program is to provide education, outreach, and direct services to the underserved Hispanic population in outlying areas of Maricopa County and the Native American population in the rural communities of northern Arizona. The primary objectives of the program are 1) to expand and develop culturally sensitive and linguistically appropriate material for caregivers, 2) increase community awareness, and 3) increase the availability and use of respite.

Training Programs

APS Competency-Based Core Training

The Adult Protective Services (APS) Competency-Based Core Training was implemented in 1996. The training educates all new APS staff and personnel from other agencies on aging issues. In SFY 2001, 162 trainees attended the APS Competency-Based Core Training. The training is held semi-annually in Phoenix, and consists of five modules, totaling 72 hours of instruction.

SFY 2001 Core Modules and training schedule

Core Module 700	Legal	10/31-11/2/2000	&	4/18/2001
Core Module 701	Adult Services Practice	3/14-15/2001	&	6/12-13/2001
Core Module 702	Casework Process	7/12-14/2000	&	4/18-20/2001
Core Module 703	Adult Development	8/16-18/2000	&	5/15-16/2001
Core Module 704	Separation and Loss	9/12-13/2000	&	5/29-30/2001

Core Module Assessment

In SFY 2001, individuals who completed the five core modules were surveyed on training module content and relevance of the training to their job performance. Results of the survey indicated that additional training was needed in the following areas: 1) culture differences; 2) mental health; 3) alcohol substance abuse; 4) guardianship and conservatorship petitions; 5) continued case management; and 6) legal training. Core Module Assessments are conducted annually, in accordance with the Aging and Adult Administration (A&AA) Strategic Plan. These areas will be priority subjects for future training.

Specialized Training

The APS Statewide Training Conference was held on November 29-30, 2000. The conference was titled "Health and Medical Issues, Diseases of Aging". Over 170 staff from APS, the Ombudsman Program, Legal Service Coordinators, Division of Developmental Disabilities, Area Agencies on Aging, Law Enforcement, and other state and community agency personnel attended this conference. The key topics of the conference included:

- ♦ Diseases of Aging: Understanding the common medical conditions seen in victims of elder mistreatment
- ♦ Essentials of Psychological Disorders
- ♦ The Older Adult: Psychiatric drugs and other medication use issues

The first annual "Consumer Medicare and AHCCCS (Arizona Health Care Cost Containment System) Issues and Fraud Conference" was held on May 23 &

24, 2001. The conference successfully delivered a comprehensive and in-depth message about consumer issues, safety, and prevention of being a victim of fraud. Several dynamic speakers presented up-to-date cases and techniques to an audience of state, city, and social service professionals along with private insurance agency personnel. Topics of discussion included how the Medicare system works and ways in which fraud occur; an overview of AHCCCS and how to help detect fraud such as telemarketing fraud, identity theft, criminal fraud; and elder abuse.

On June 20, 2001 a national satellite videoconference – “Serving the Unserved and Underserved Populations” was hosted by the A&AA and the University of Arizona. Information, techniques, and resources for addressing Medicare, Medicaid and fraud was presented to a crowd of thirty-six. Participants in the videoconference were from Department of Economic Security agencies and other community agencies. Unserved and underserved individuals and populations, who, due to language or cultural differences experience barriers to communication, were the focus of the videoconference.

In an effort to provide training for the Non-Medical Home and Community Based System, the A&AA contracted with the William E. Morris Institute for Justice to develop an ethics training curriculum and handbook for home care providers. The ethics training was piloted in May and June of 2001 in Maricopa, Pima and Cochise counties.

Quality Assurance

Survey Methods

The focus of Quality Assurance within the Aging and Adult Administration (A&AA) is to determine the satisfaction levels of the customers who utilize services and service providers. In determining satisfaction levels, random sampling and standardized questionnaires were used to identify program strengths and weaknesses and implement programmatic changes in an effort to increase satisfaction levels over time.

In SFY 2001, A&AA Quality Assurance reviewed 635 Adult Protective Services (APS) cases and conducted three major satisfaction surveys. Surveys targeted: 1) A&AA service providers, 2) Foster Grandparent Program (FGP) volunteers and supervisors, and 3) legal assistance customers and providers. Technical assistance was provided by the Arizona Department of Administration, Personnel Division, who used computer technology to scan survey answer sheets. Computer scanning has proven to be an efficient and accurate method of obtaining raw data for analysis over the past two years.

Customer and Provider Satisfaction Surveys

In SFY 2001, the provider satisfaction survey was sent to the Area Agencies on Aging (AAAs), tribal contractors, and the Senior Community Service Employment Program (SCSEP) contractors and legal providers. Ninety-six surveys were sent, and 51 were returned, a return rate of 53%. Survey results indicated that 86% of the contracted providers were satisfied with services received from the A&AA.

During SFY 2001, the recipients of legal assistance services were asked to rate their satisfaction with the service they received. Out of 526 surveys mailed, 232 were returned, a return rate of 44%. Of those who returned the survey, nearly 88% expressed a satisfaction with the services they received.

Surveys were sent to 112 participants in the FGP in SFY 2001. Seventy-eight responses were returned, a return rate of 70%. FGP surveys detailed the participant's satisfaction with the training, supervision, and compensation. The results showed that 87% of the respondents were satisfied with the program.

Adult Protective Services Case Reviews

APS cases are reviewed for quality assurance annually. During SFY 2001, closed APS cases were randomly selected for review. Twenty criteria were used as standards to measure the work conducted in the areas of intake, case

management and supervision. The SFY 2001 case review study considered cases to be quality assured that met at least 18 out of 20 criteria. The results showed that statewide, 447 or 70.4% of the 635 cases reviewed met at least 18 criteria.

Arizona Performance Outcomes Measurement Project

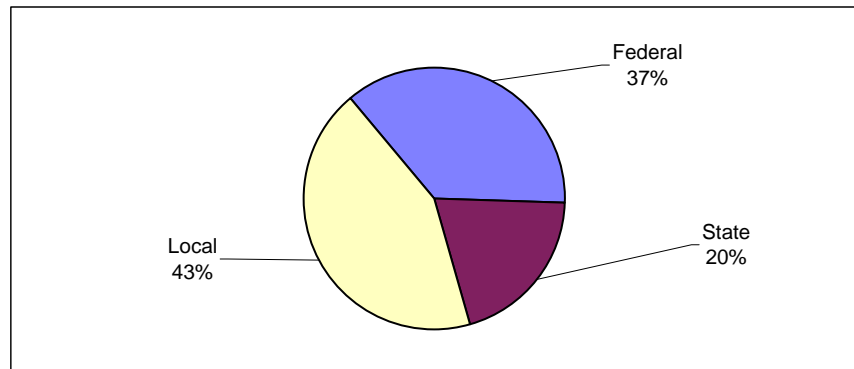
The A&AA participated in the Performance Outcome Measures Project II (POMP II) sponsored by the Administration on Aging (AoA) during fiscal FY 2001⁴. POMP II is a result of efforts by the AoA to promote evidence-based decision-making in the development of policies and programs for the elderly, their families and caregivers. AAAs Regions 1, 2 and 3 participated in a POMP II pilot project along with numerous other agencies in fifteen states. Participating Arizona agencies selected the following service domains for performance measure: 1) nutrition; 2) caregiver; 3) information & assistance; 4) transportation; 5) home care satisfaction; 6) barriers to service; 7) capacity building; and 8) case management. Data collection has been provided to the AoA for processing analysis.

⁴ POMP II replaced the Non-Medical Home and Community Based (NMHCBS) customer satisfaction survey that was conducted the past two years and which will resume in SFY 2002.

Fiscal Report

SFY 2001 Federal, State and Local Expenditures

Chart 9 – SFY 2001 Total Expenditures by Funding Source



SFY 2001 Program and Service Expenditures

Local -	\$19,917,135.00	- Local Contributions
	<u>2,430,260.00</u>	- Program Income Contributions
	\$22,347,395.00	- Total Local
State -	\$ 100,000.00	- State Program Development
	252,716.00	- State Emergency Services Program (APS)
	340,376.00	- State Ombudsman
	425,479.00	- State Respite
	440,256.00	- State Tobacco Tax
	1,006,975.00	- State Match
	1,535,337.00	- State Case Management
	1,539,095.00	- State Supplemental Payment Program (SPP)
	<u>4,534,853.00</u>	- State Home Care
	\$10,175,087.00	- Total State
Federal -	\$14,602,105.00	- Federal Cost
	1,412,792.00	- Elderly Feeding Program
	2,583,689.00	- Title V Program
	<u>334,335.00</u>	- Foster Grandparent Program
	\$18,932,921.00	- Total Federal

\$51,455,403.00 - TOTAL SFY 2001 EXPENDITURES⁵

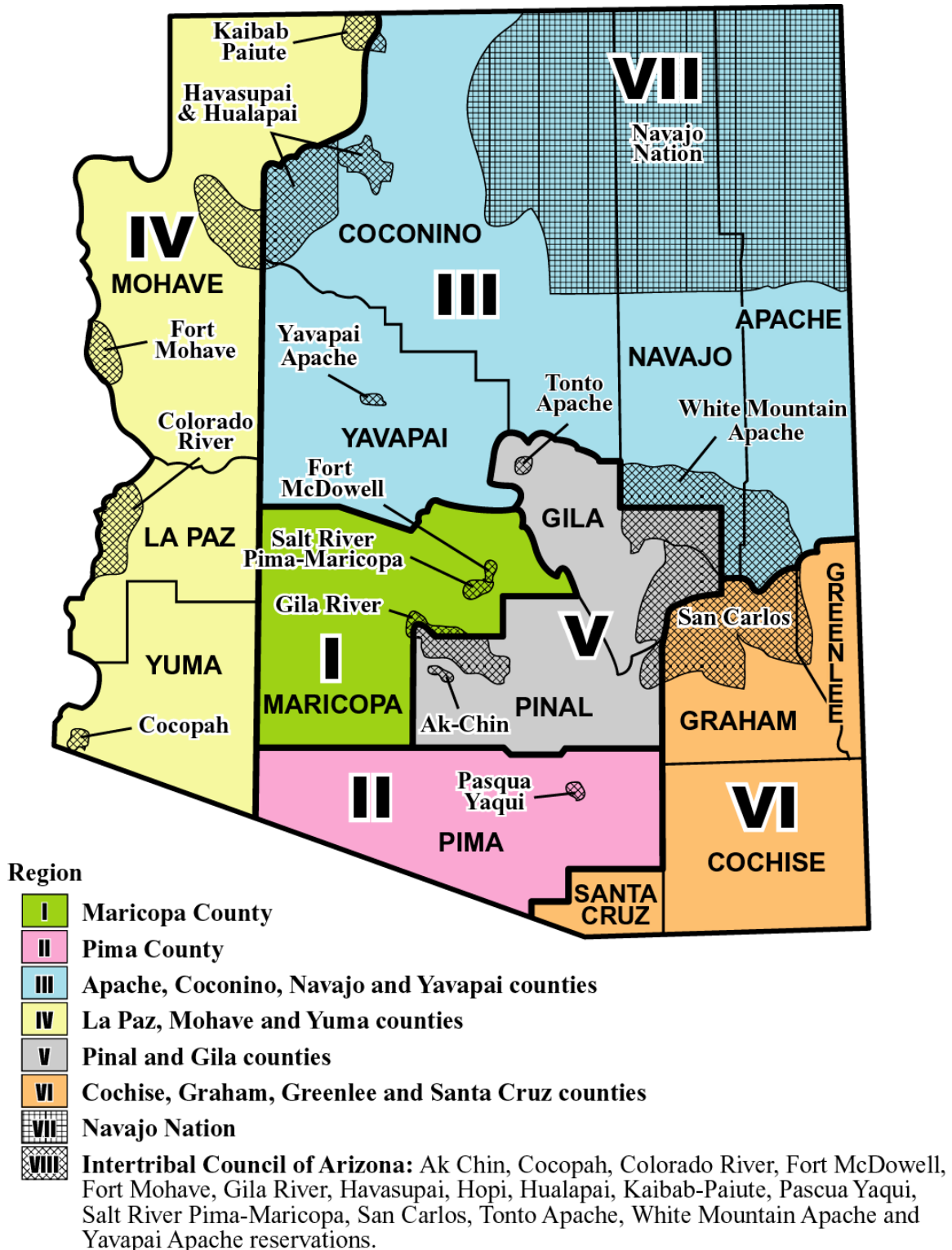
⁵ Figures shown above do not reflect any adjustments made after June 30, 2001.

Our Future

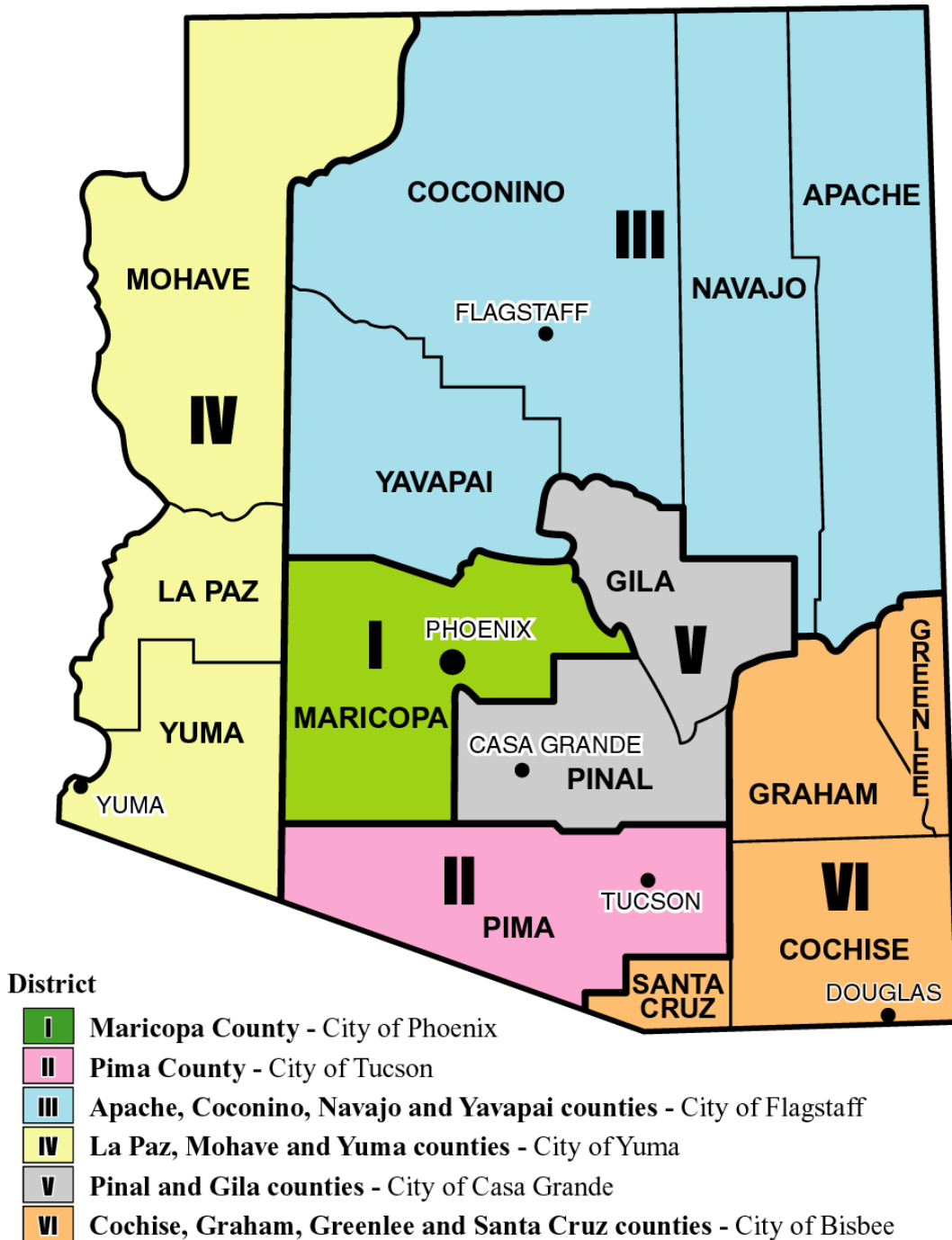
The Aging and Adult Administration is committed to supporting and enhancing the ability of at-risk and older Arizonans to meet their needs to the maximum of their ability, choice and benefit. Towards that end, the Administration seeks to expand services and programs in the following areas:

- ♦ Initiate three new local support groups for caregivers in Northern Arizona (targeting White Mountain Apache and Hopi) and Casa Grande.
- ♦ Promote public awareness on caregiver issues by providing presentations to state agency employees.
- ♦ Conduct in-service training for front line state agency caseworkers on issues/concerns relating to grandparents raising grandchildren.
- ♦ Establish customized training with Bank of America for older workers' entry into the banking industry.
- ♦ Implement best practices through quarterly review reports of Area Agencies on Aging SHIP, legal and Ombudsman monthly reports.
- ♦ Expand the curriculum of Adult Protective Services Core-Competency Module Training to include: 1) culture differences; 2) mental health; 3) alcohol substance abuse; 4) guardianship and conservatorship petitions; 5) continued case management; and 5) legal training.
- ♦ Collect and analyze data from the SFY 2001 Arizona Performance Outcome Measurement System pilot project in Area Agency on Aging Regions 1,2 & 3.
- ♦ Implement Senior Community Service Employment Program Annual Coordination Plans, as required by the Older Americans Act Amendments of 2000.
- ♦ Partner with the Arizona State Health Insurance Program and the Arizona Health Care Cost Containment System to enroll more seniors in the Medicare Cost Sharing program, which will allow seniors more medical care and prescription coverage.

APPENDIX A Area Agencies on Aging Regions



APPENDIX B DES Districts



APPENDIX C

Glossary of Acronyms

AD1/AD2.....	Adaptive Aids
A&AA	Aging and Adult Administration
AAA's	Area Agencies on Aging (or Regions)
AARP	American Association of Retired Persons (former name)
ACYF.....	Administration of Children, Youth and Family Services
ADHS.....	Arizona Department of Health Services
AHCCCS	Arizona Health Care Cost Containment System
AoA	Administration on Aging
APS.....	Adult Protective Services
AT1	Attendant Care
CM2	Case Management
C-POW+ER	Coalition to Promote Older Worker and Employer Resources
DDD	DES Division of Developmental Disabilities
DES	Arizona Department of Economic Security
DOA.....	Arizona Department of Administration
FGP	Foster Grandparents Program
GACA	Governor's Advisory Council on Aging
GCDD	Governor's Council on Developmental Disabilities
GCTF	Grandparents' Concerns Task Force
HS2	Housekeeping
ITCA	Intertribal Council of Arizona
LTC.....	Long-Term Care
NMHCBS	Non-Medical Home and Community Based Services
OAA	Older Americans Act
POMP II	Performance Outcome Measures Project II
PSA.....	Planning and Service Areas (also known as Regions)
PSIP	Private Sector Initiative Program
RAPP	Relatives As Parents Program
RP1.....	Home Repair
RSP/RS3	Respite
SCSEP	Senior Community Service Employment Program
SFY.....	State Fiscal Year
SHIP	State Health Insurance Program
TR4	Transportation
WIA	Workforce Investment Act

Arizona Department of Economic Security
Aging and Adult Administration
Site Code 950A
1789 W. Jefferson St., Phoenix, AZ 85007

For more information regarding Aging and Adult Administration (A&AA)
programs and services, call 602-542-4446
or visit the DES website at
www.de.state.az.us

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